BEST AVAILABLE COPY 7

PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective October 1, 2000													
CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14		Contraction of the Contraction o			RATE	T FEE	OR T	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		⊢	ASIC FE		+	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			/ minus 20=		•		-		2 333.00	IOR		710.00	
INDEPENDENT CLAIMS			minus 3 =		. /		-	X\$ 9=	 	OR	X\$18=		
MULTIPLE DEPENDENT CLAIM P								X40=	ļ	OR	X80=	80	
L								⊦135=		OR	+270=	270	
* :	the difference	in column 1 is	ess than zero, enter "0"			column 2 TOTA				OR	TOTAL	1000	
CLAIMS AS AMENDED - PART II										_	OTHER	THAN	
_	(Column 1) CLAIMS		(Colun				SMAL		ENTITY OR		SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	$\overline{}$	(\$ 9=		OR	X\$18=		
	Independent	<u>.</u>	Minus	***		=)	<40=	 	OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM			405		1 1				
								135=		OR	+270= TOTAL		
	(Column 1) (O-1) (O-1)							IT. FEE		OR ,	ADDIT. FEE		
AMENDMENT B	r	(Column 1) CLAIMS		(Colum					1001				
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	40=		OR	X80=		
	rino i rheoe	NTATION OF MU	LIIPLE DEF	ENDENT	CLAIM			35=		╵╶┞	+270=		
			•					TOTAL		OR	TOTAL		
		(Column 1)		(O - I	0\	10 1 0		T. FEE		OR A	DDIT. FEE		
ပ		(Column 1) CLAIMS		(Colum	ST	(Column 3)	_			r			
AMENDMENT C	and the second	REMAINING AFTER AMENDMENT	e Maria de	NUMB PREVIOU PAID F	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	6 9=		OR	X\$18=		
	Independent		Minus	***		=	X	40=		_	X80=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	PENDENT	CLAIM					OR	X00=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								35=		OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL DDIT. FEE			
1	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number	found in	the app	ropriate box	in colu	mn 1.		